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## BIB DATA SHEET

CONFIRMATION NO. 8908

<b>SERIAL NUMBER</b> 10/587,535	<b>FILING or 371(c) DATE</b> 04/05/2007 <b>RULE</b>	<b>CLASS</b> 424	<b>GROUP ART UNIT</b> 1649	<b>ATTORNEY DOCKET NO.</b> STAN-332
<b>APPLICANTS</b> Ian Carroll, Mountain View, CA; David Clark, Palo Alto, CA; Sean Mackey, Los Altos, CA; <i>DK 10/4/07</i>				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/US05/03081 01/26/2005 <i>DK 10/4/07</i> which claims benefit of 60/539,476 01/26/2004				
<b>** FOREIGN APPLICATIONS *****</b> <i>NONE</i>				
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED *** SMALL ENTITY **</b> 08/06/2007				
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and Acknowledged <i>[Signature]</i> Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWINGS</b> 0	<b>TOTAL CLAIMS</b> 16
<b>INDEPENDENT CLAIMS</b> 3				
<b>ADDRESS</b> BOZICEVIC, FIELD & FRANCIS LLP 1900 UNIVERSITY AVENUE SUITE 200 EAST PALO ALTO, CA 94303 UNITED STATES				
<b>TITLE</b> Toxin Induced Sympathectomy				
<b>FILING FEE RECEIVED</b> 565	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	